SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

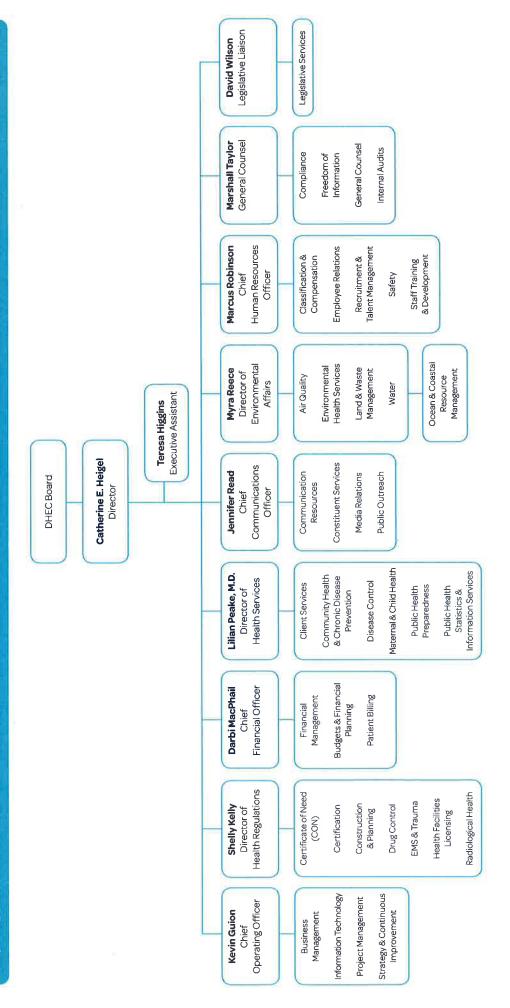
House Ways and Means Budget Briefing FY 2017-18



Table of Contents

Agency Leadership Contact Information	Tab 1
Agency Organizational Chart	Tab 2
Major Program Areas	Tab 3
2015-2016 Accountability Highlights	Tab 4
Hurricane Matthew Response Summary	Tab 5
Prioritized Summary of FY 2017-18 Budget Request	Tab 6
Proviso Requests	Tab 7
FTE Request for FY 2017-18	Tab 8
2016 State Carry Forward Funds	Tab 9
Historical Budget/Expenditures	Tab 10
Fiscal Year 2017-18 Agency Budget Plan	Tab 11
2017 Program Enhancements (State Recurring Funds)	Tab 12
Appendix A – FY 2015-16 Accountability Report	Tab 13

dhec Organizational Chart



Major Program Areas

Environmental Affairs

DHEC Environmental Affairs consists of five bureaus: Air Quality, Environmental Health Services, Land & Waste Management, Water, and the Office of Ocean & Coastal Resource Management.

Bureau of Air Quality (BAQ)

Develops and implements strategies to maintain the quality of South Carolina's air. BAQ provides a variety of services including:

- Reviewing permit applications and issuing air quality construction and operating permits to industrial, commercial and institutional facilities
- Supporting permitting through modeling, technical assistance and daily ozone forecasts
- Implementing federal and state air toxics programs by offering technical and compliance assistance to staff and industry
- Conducting compliance assistance and assurance through routine monitoring, review of operational and emissions reports and periodic inspections

Bureau of Environmental Health Services (BEHS)

Supports DHEC's air, land and water programs through regional offices and a central laboratory. BEHS is also responsible for emergency response activities. The services they provide include:

- Inspecting permitted facilities and issuing food and septic tank permits
- Responding to foodborne outbreak investigations
- Responding to citizen complaints about any actual or potential release of pollutants into the air, land or water
- Responding to chemical and oil spills, fish kills and open burning of items such as tires, plastic, copper wire and asbestos covered material

Bureau of Land & Waste Management (BLWM)

Coordinates mining and waste-related activities and implements assessment and corrective actions for contaminated sites. BLWM provides a variety of services including:

- Providing technical assistance for the proper management of solid and hazardous waste, technical review of sampling protocols and analytical data
- Issuing permits for solid waste and mining activities as well as underground storage tanks
- Promoting waste reduction and recycling through technical assistance and education/awareness programs to local governments, schools, businesses and the public
- Overseeing the investigation, remediation and clean-up of contamination from Superfund, dry-cleaning, above-ground storage tanks and brownfield sites

Bureau of Water (BOW)

Helps ensure that South Carolina's waters are drinkable, swimmable and fishable through regulatory and voluntary programs to control point and nonpoint sources of pollution. BOW provides a variety of services including:

- Permitting wastewater discharges from industrial and domestic sources and as well as on-site wastewater systems (septic tanks)
- Issuing stormwater permits through the National Pollutant Discharge
 Elimination System for construction sites, municipal systems and industrial sites
- Developing state water quality standards, issuing the bi-annual list of the state's polluted waters and developing corrective action plans for those waters and controlling nonpoint sources of pollution through grants, voluntary measures and technical assistance
- Implementing and overseeing the state's dam safety program for more than 2,300 dams statewide

Office of Ocean & Coastal Resource Management (OCRM)

Preserves sensitive and fragile areas while promoting responsible development in the eight S.C. coastal counties. OCRM offers a variety of services including:

- Implementing the Coastal Zone Management Program to manage wetland alterations, stormwater and land disturbance activities, certify all federal and state permits and direct federal actions and all alterations of tidally influenced critical area lands, waters and beaches
- Preserving sensitive natural, historic and cultural resources through regulatory oversight and guidance
- Providing technical expertise to resolve complex coastal management issues

 Encouraging low impact and alternative development to preserve water quality and environmental integrity

Health Services

DHEC Health Services is comprised of the following areas: Maternal and Child Health (MCH); Community Health and Chronic Disease Prevention (CHCDP); Disease Control (DC); Client Services; and Public Health Statistics and Information Services. Health Services works with the four health regions, the Centers for Disease Control and Prevention, and community partners to prevent disease and injury, promote healthy families, and prevent and control communicable diseases and outbreaks in South Carolina.

Maternal and Child Health (MCH)

Promotes the health of women, children, and infants by providing health care services and programs, linking community services, and facilitating systems of care for pregnant women and infants. MCH is comprised of five divisions: Children's Health, Women's Health, Women, Infants and Children (WIC), Research and Planning, and Oral Health.

Community Health and Chronic Disease Prevention (CHCDP)

Houses community-oriented prevention services and works with the CDC, local health departments, and stakeholders to prevent disease and injury and promote healthy lifestyles. CHCDP is comprised of five divisions: Health Equity, Promotion and Wellness; Injury and Violence Prevention; Cancer Prevention and Control; Chronic Disease Epidemiology; and Tobacco Prevention and Control.

Disease Control

Works to prevent and control communicable diseases and illnesses in South Carolina. Disease Control is comprised of three divisions: Acute Disease Epidemiology (DADE), STD/HIV, and Immunizations.

Client Services

Responsible for assuring the implementation of public health services across the state. Client Services is comprised of four health regions across the state, the Bureau of Laboratory, the Primary Care Office, the Office of Public Health Nursing and Home Health Services.

Public Health Statistics and Information Services (PHSIS)

Houses vital statistics operations as well as the core elements needed to assist in carrying out the agency's surveillance and assessment responsibilities. The office is

also responsible for conducting Institutional Review Board (IRB) oversight on all research conducted by the agency to ensure the protection of human subjects involved in research.

Public Health Preparedness

Works with DHEC staff and community partners to prepare for public health emergencies. Prepares all hazards plans, policies and procedures and conducts training and exercises to support DHEC's preparedness. Works with communities to prevent and respond to public health emergencies.

Health Regulations

DHEC Health Regulation's primary purpose is to work with health care facilities and services to protect the public's health by assuring that safe, quality care is provided.

Health Facilities Licensing and Certification

Licensing and certification of health care facilities is critical to ensuring that established standards are met by hospitals, ambulatory surgical centers, hospice programs, and other health care facilities. Rules and regulations are developed to ensure that South Carolinians receive safe, high quality health care.

Certificate of Need (CON)

Authorizes the implementation or expansion of health care facilities and services in South Carolina. A certificate of need is based on a calculation of need for a particular medical service from the South Carolina Health Plan. A CON authorizes a person or facility to provide a portion of that calculated need in a county or service area, which may comprise several counties.

Emergency Medical Services (EMS) and Trauma

Develops and regulates systems for quality emergency medical care in South Carolina. This ensures EMS providers are fully trained and that their medical vehicles are properly equipped.

Radiological Health

Energy emitted from a source is generally referred to as radiation. Radiation exists in the natural environment (e.g., heat and light from the sun), as well as being generated by man-made devices (e.g., X-rays). The Radiological Health program works to protect South Carolinians from unnecessary exposure to radiation, which can come from a variety of sources such as X-ray equipment, radioactive materials, and tanning beds.

Construction, Fire and Life Safety

Reviews plans, specifications, and construction for health care facilities licensed by the state. The program also conducts periodic fire and life safety surveys of facilities to ensure continued compliance with appropriate codes, standards, and regulations.

Drug Control

Aims to promote and protect public health through enforcement of South Carolina's Controlled Substances Act. The program administers the state's prescription drug monitoring program (known as SCRIPTS), which tracks the prescribing and dispensing of all Schedule II, III and IV controlled substances by licensed professionals such as doctors, pharmacists, dentists, and veterinarians.

2015-2016 Accountability Highlights

(Full Accountability Report in Appendix A)

DHEC's Day-to-Day Operation

DHEC performs countless important functions impacting nearly every citizen of our state. Snapshot of what "business as usual" looks like for DHEC:

Health Services

- In the last year (Aug 2015 Aug 2016), we had **777,781 clinical client encounters** at our health departments for WIC, preventive health, immunization services, and others
- In 2015, our staff investigated a total of **363 acute disease outbreaks.**
- During this same time period, our staff received **55,254 reports of acute diseases** (laboratory, morbidity reports).
- We also followed up on and conducted contact investigations with **593 patients that** were reported to have tuberculosis infection or disease.
- Through our follow-ups and contact investigations with these individual cases, our team identified **1,256 potential contacts**.

Environmental Affairs

- As of December 2015, DHEC's Environmental Affairs had over 30,000 active
 permits, including but not limited to asbestos projects, private wells, septic tanks,
 industrial stormwater general permits, infectious waste generators, mines and more.
- In 2015, Environmental Affairs conducted **over 90,000 inspections**, covering programs as diverse as recreational waters and underground storage tanks to air quality.
- Also during this time, our Bureau of Environmental Health Services responded to and investigated 46,188 complaints, ranging from rabies exposures to open burning to emergency response spills.

Health Regulations

- During 2015, our Health Regulation team conducted over 8,020 Health
 Regulation inspections, including facility, construction, registrants of controlled substances, EMS agencies, ambulances and X-Ray machines. This includes:
 - 3,737 total facility inspections (including fire and life safety)
 - 398 construction inspections
 - 1,703 total inspections of registrant and controlled substances
 - 127 EMS agency inspections
 - 537 ambulance inspections
 - 1,394 X-Ray machine inspections
 - 132 facility inspections for radioactive materials

Event Response

October 2015 Flooding

 Collectively, DHEC staff expended more than 55,000 work hours on flood response and recovery. The agency was able to mobilize, quickly identify problems and develop solutions, while continuing to provide the day-to-day services citizens require.

Hepatitis A Outbreak in Food Handlers

- In September 2015, DHEC was notified by a hospital lab of positive test results for Hepatitis A in employees of two Upstate restaurants. The outbreak was successfully managed and no patron of the restaurants has developed Hepatitis A.
- DHEC Health Services' staff administered **4,975** Hepatitis A vaccinations.
- DHEC's Environmental Affairs staff conducted restaurant inspections.
- Response included **277 DHEC staff** from across the state.

Tuberculosis (TB) in South Carolina

- Last year, DHEC responded to **37 TB outbreaks** in various settings, including a child care facility, a high school, multiple churches, dialysis centers, a nursing home and many other businesses.
- Through DHEC's investigations, **600 individuals were identified, assessed and tested**.

Wildfires

- DHEC has been a leading source of information concerning wildfire smoke safety all across the state, by providing interviews and dependable forecasting. Additionally, we have provided material assistance to first responders and emergency management at the Pinnacle Mountain fire.
- The Upstate Public Health Preparedness mobile communications trailer was on scene at the Table Rock Wesleyan Camp command post in Pickens starting on November 13, 2016.
- DHEC Health Services medical staff increased public awareness regarding health hazards associated with smoke in affected areas.
- DHEC Bureau of Air Quality staff provided daily air quality forecasts.
- DHEC had 374,466 views on its website.

Hurricane Matthew Response Summary

- DHEC and the U.S. Army Corps of Engineers **assessed** the condition of **469 dams** in areas of the state impacted by the storm.
 - 25 dams were found to have breached (20 regulated and 5 unregulated)
 - **21 Emergency Orders** were issued to owners of regulated dams requiring that they lower water levels and engage a licensed professional engineer to perform a detailed inspection of the dam.
 - **115 Directive Letters** were issued to owners of regulated dams requiring that they engage a licensed professional engineer to assess the dam to identify any necessary repairs and/or maintenance.
- 27 Boil Water Advisories were issued for storm-related issues.
- 9 Special Medical Needs Shelters were opened for a total of 130 shelterees.
- 114 inpatient health care facilities, including 4 hospitals, evacuated from the medical evacuation zones. Over 1,700 patients were transported. 13 hospitals located in the medical evacuation zones sheltered in place.

Prioritized Summary of FY 2017-2018 Budget Request

	Form B	Form C
	"Recurring"	"Non-Recurring"
State/Federal Regulatory Requirements:		
Salary (Increments) Required	\$2,079,184	
Fringe Benefits (Increments) Required	\$551,828	
Electronic Health Records	\$3,800,000	
Mission Critical / High Risk to State:		
Dam Safety Program		\$4,893,750
Data Center Migration	\$3,200,000	
Public Health Nursing Salary	\$1,901,513	
Foundational / High Priority:		
EA Lab Quality Assurance	\$166,505	\$29,069
EA Lab Equipment	\$60,000	\$142,092
Stroke System of Care	\$253,306	\$7,308
Removal of Non-Compliant UST		\$291,000
Unregulated Petroleum Releases	\$250,000	
Lead Screening & Follow Up	\$511 <u>,</u> 234	\$51,200
Cancer Screening		
Best Chance Network (Breast & Cervical Cancer Screening)	\$1,000,000	
USC Colon Cancer Prevention Network	\$1,000,000	
Hemophilia	\$1,800,000	
Sub Totals Recurring & One-Time Budget Requests	\$16,573,570	<u>\$5,414,419</u>
Total Budget Request		\$21,987,989

Item	Summary	Amount	Recurring/N onrecurring	FTEs
Regulatory				
Salary Increments	State Allocation of Salary Increments to offset the general increase appropriated by the General Assembly.	\$2,079,184	Recurring	NO
Fringe Benefits Increments	State Allocation of Fringe Benefit Increments to offset the increased health insurance costs	\$ 551,828	Recurring	NO
Electronic Health Records	DHEC's FY 2017 budget includes nonrecurring funds to support the implementation of an electronic health record (EHR). The Agency requires recurring funds to sustain the ongoing administration, licensing, and maintenance of the system beyond the first year of implementation. Methodology- The following figures are based on industry averages. Licensing and maintenance for EHR (Est \$8000/provider): \$3,600,000 Licensing and maintenance for practice management (Est. \$2,000/provider); \$900,000 Expected Total salary and fringe for 5 FTE's: \$483,580 Travel for ongoing training, support, and oversight for EHR administrator and clinical lead: \$13,920 General supplies of 5 FTE's (Standard @ \$500/person): \$2,500 Offset: Estimated cost offset by improved revenue cycles \$1,200,000.	\$3,800,000	Recurring	5
Mission				
Critical				
Dam Safety Program	DHEC's Dam Safety Program has dealt with two disasters in two years, which has strained an already limited budget. The legislature appropriated \$3.15M in funding for flood response efforts and engineering support. Those funds are essentially spent or obligated for that work. Hurricane Matthew now requires	\$4,893,750	Non- Recurring	NO

	additional funding to place dam status and to provide detailed in dams around the state to help r impacts. Summary	nformation on			
	Hurricane Matthew Response Contractual Support Follow-up Operating Total Estimated Cost Less DHEC carryforward funds Total Budget Need	\$2,250,000 \$3,010,500 \$133,250 \$5,393,750 -\$500,000 \$4,893,750			
Data Center Migration	The DHEC Data Center is classifi with dedicated site infrastructur information technology capabili 3,400+ DHEC teammates, locate and office locations statewide. houses mission-critical agency a well as highly sensitive patient, records, and employee-related request is for the remaining fun support migration to the Depart Administration's Shared Service Methodology-Data Center mod based on market rate for infrast service (laaS). DHEC has 500+ s applications that will be migrate Department of Administration's Services. Offset: The Agency has assessed its ability to offset increases to provide the content of the co	ed as a low Tier I re to support sties for the ed at 80+ service The center applications as constituent, vital data. This ds needed to the tructure as a servers and 300+ ed to the shared dand analyzed programs and	\$3,200,000	Recurring	NO
	have been unable to identify ot The Agency's FY 2017 Base App \$25M less than its Appropriatio	ropriation is still			
Public Health Nursing Salary	Registered nurses are the primal providers in each county health Agency compensation is less that agencies and the private sector turnover rates are increasing from to 24.6% in SFY15. Recruitment months and specialized training public health nursing services are	department. an other state . Nursing om 15% in SFY14 averages three s to provide	\$1,901,513	Recurring	NO

	months. This results in reduced access to care for citizens due to a nine-month window to recruit and train a public health nurse. With the current turnover rate, we have an estimated loss of service to 20,520 individuals per month.			
	Methodology- The percentage increase for experienced nurses (LPNs, RNs, and APRNs) is based on an evaluation of each individual nurse to determine the complexity of clinical services provided; number of employees supervised; nursing and program management responsibilities and years of agency service. Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Foundational				
EA Lab Quality Assurance	Two positions are requested to satisfy Environmental Protection Agency (EPA) requirements ensuring lab and data competency as addressed during recent EPA audits. DHEC does not currently have an Office of Quality Assurance to evaluate processes or Quality Assurance Project Plans (QAPPs), as required by grant commitments. Methodology- Two Chemist II or Env. Health Manager II positions at the midpoint of the pay band, fringe and indirect costs. Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.	\$166,505	Recurring	2
EA Lab Quality Assurance	These are onetime costs for required equipment, including a vehicle and computers Methodology- 2 Laptops and Monitors \$ 4,069 1 Vehicle – statewide travel \$25,000	\$29,069	Non- Recurring	NO
	Offset:			

	The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
EA Lab Equipment	Lab equipment must be maintained to protect public health from pollutants, which EPA regulates, including standards and recommendations under the Safe Drinking Water and Clean Water Acts. Methodology- • Methodology change to satisfy FDA requirements for analyzing samples — supply cost @ \$20,000 • Increase in cost of vendor service maintenance support for instrumentation — vendor cost @ \$40,000 Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.	\$60,000	Recurring	NO
EA Lab Equipment	Instrument replacement is crucial to maintaining an EPA certified laboratory with the capabilities to generate accurate and technically justifiable data. Methodology- Gamma Spectrometer \$ 120,037 Incubator (Milk Lab) \$ 16,000 Sonicator \$ 6,055	\$142,092	Non- Recurring	NO
	The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Stroke System of Care	SC has the third highest mortality rate from stroke in the U.S. It is the fourth leading cause of death in SC. DHEC is tasked with carrying out a number of initiatives to include: establishing a Stroke Advisory Council; ensuring a current list of stroke centers is posted on the DHEC website; developing and implementing a designation system using the national accrediting entities; and establishing a stroke data/registry system.	\$253,306	Recurring	1

	Methodology: Funding requested for personnel, fringe and indirect cost are for one (1) FTE is \$69,660. Operating expenses include contractual services in the amount of \$158,364 (Landline \$228; cellular phone service \$636; Heart and Stroke Care Alliance Annual meeting \$10,000; and database licenses for 59 are \$147,500). Travel expenses related to the program is \$6,500 and fixed charges for rent is \$1,893. Supplies for staff are \$403 and supplies related to outreach coordination with SCDHEC Health Services is \$16,486. Total funding request is \$253,306.			
	Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Stroke System of Care	These are onetime costs for required supplies and equipment. Methodology: One time funding for supplies, equipment and fixed assets \$7,308 Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.	\$7,308	Non- Recurring	NO
Removal of Non- Compliant UST	South Carolina Underground Storage Tank Regulations required owners operating underground storage tank systems (USTs) to either upgrade equipment to meet certain design criteria or to permanently close USTs before December 23, 1998. The UST Management Division continues to pursue closure of many of these facilities. This funding will allow DHEC to remove or properly abandon 32 out-of-compliance USTs at nine separate facilities and, thus, eliminate the potential for their continued (or future) release to the environment. Methodology:	\$291,000	Non- Recurring	NO
	Methodology:			

	Estimated costs to cost to close 32 out of compliance USTs at 9 separate facilities. Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Unregulated Petroleum Releases	We have seven petroleum release sites from unregulated sources typically aboveground storage tank (AST) systems where the responsible party has defaulted. In addition, we have over forty sites with a high likelihood of defaulting on their liability. The confirmed petroleum releases at these sites represent ongoing sources of contamination adversely impacting the groundwater resources of the state. This funding is needed to assess and remediate (cleanup) these contaminants to minimize or eliminate threats to ground water, surface water bodies or sensitive ecological. Methodology- Based on the average cleanup cost of \$119,524 per petroleum release, the total liability for the 65 releases is estimated to be approximately \$7.77m. The Agency has confirmed 7 of the 65 sites where the responsible party is either insolvent of deceased. Recurring funding at the rate of \$250,000 per year will allow the Agency, using private contractors, to begin to assess and cleanup these releases. Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources. 65 petroleum release sites from unregulated sources (typically above ground tank or AST systems) where the owner or responsible party has defaulted or has a high likelihood of defaulting on their liability.	\$250,000	Recurring	NO
Lead Screening & Follow Up	Lead can affect nearly every system in the body and is particularly harmful to younger children. DHEC has no state funding to support the Childhood Lead Screening Program or upgrade its aging data system. DHEC's lead data system	\$511,234	Recurring	5.4

	does not have the capacity to perform the tracking, triggering, and documentation of investigation results that are critical to programmatic expansion nor to generate reports. Methodology- Personnel Costs for 5.4 FTEs (Salary, fringe and indirect); medical consultation, contractual costs for data entry and SCION (new data			
	system for lead test results). Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Lead Screening & Follow Up	These non-recurring funds would be used to buy computers, monitors and X-ray fluorescence (XRF) sampling instruments for staff to expand environmental lead inspection and follow-up services at residences where children under 6 years of age are identified with elevated blood lead levels (EBLLS) > 10 mcg/dl.	\$51,200	Non- Recurring	NO
	Methodology- 2 portable XRF sampling instruments at \$15,500 each (\$31,000) 7 desktop computers and monitors \$20,200.			
	Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Best Chance Network	DHEC's breast and cervical cancer screening program, Best Chance Network (BCN) receives federal grant funds; however, these federal funds are not sufficient to meet the health service needs of the state. To date, state funds have been provided to support these activities on a year-to-year and intermittent basis, making it difficult to plan and sustain services, particularly for establishing and maintaining screening and follow-up systems of care with medical providers. Without predictable and sustained state funding to support these	\$1,000,000	Recurring	NO

	services, cancers will go undetected until later stages, resulting in increased death and illness among South Carolinians, and increased costs to the state Medicaid program and overall healthcare system since later stage diagnosed cancers cost more to treat. The request is for \$1M to support Best Chance Network.			
	 Methodology- BCN: Utilizing a clinical cost worksheet proved by CDC, the covered breast, cervical screening and diagnostic CPT codes are utilized along with the reimbursement rate. The average cost per patient is \$250, which is multiplied to derive the screening goal. 			
	Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Colon Cancer Prevention Network	The USC Colon Cancer Prevention Network (CCPN) receives federal grant funds; however, these federal funds are not sufficient to meet the health service needs of the state. To date, state funds have been provided to support these activities on a year-to-year and intermittent basis, making it difficult to plan and sustain services, particularly for establishing and maintaining screening and follow-up systems of care with medical providers. Without predictable and sustained state funding to support these services, cancers will go undetected until later stages, resulting in increased death and illness among South Carolinians, and increased costs to the state Medicaid program and overall healthcare system since later stage diagnosed cancers cost more to treat.	\$1,000,000	Recurring	NO

	The request is for \$1M to support USC Colon			
	Cancer Prevention Network.			
	 Methodology- Colorectal: Utilizing a clinical cost worksheet, the cost of the endoscopy suite, the pathological results, the cost of colonic preparation, the cost of patient navigation are all compiled at a set reimbursement rate (lower than Medicare. The average cost per patients is \$1,042 for colonoscopy and \$150 for Fecal Immunochemical Testing. 			
	Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Hemophilia	DHEC administers the Hemophilia Assistance Program (HAP) to provide life-saving blood products for people with hemophilia and serves as the administrator of the Medicaid Hemophilia Program for DHHS. Patients who do not qualify financially or categorically for Medicaid may qualify to received assistance provided by DHEC. \$1.8 million is required in order to cover the state match portion for Federal Medicaid reimbursement for these critical services.	\$1,800,000	Recurring	NO
	DHEC is considering a contract with Patient Services Incorporated to transition clients who have no other payment source for blood factor from HAP onto private insurance through expending premium assistance.			
	Methodology- The amount of the request was calculated based on the most recent match payment. The match amount varies depending upon the number of Medicaid recipients enrolled in the program and the types and amounts of blood products they use.			

DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL BUDGET REQUEST SUMMARY

Offset: The Agency has assessed and analyzed its ability to offset increases to programs and have been unable to identify other resources.			
Total Recurring Form B	\$16,573,570	FTEs	13.4
Total Non-Recurring Form C	\$ 5,414,419		
Total Budget Request	\$21,987,989		13.4

Proviso Requests

Proviso 34.17 Nursing Home Medicaid Bed Day Permit

Amend

DHEC recommends changing the wording to authorize transfer of Medicaid patient days to the receiving facility in the event of a resident transfer from one nursing home to another nursing home without restriction. Under the current wording of the proviso, absent a violation of state or federal law or Medicaid circumstances, a patient could not transfer to a nursing home that does not have available Medicaid beds. This proviso restricts the ability of patients to choose care.

Proviso 34.18 Mineral Sets

Delete

The Agency has not sold any mineral sets (\$3/ea.) in several years and only a few vials of material remain. The Agency recommends that the account be closed, the Proviso deleted, and remaining funds transferred to the General Fund.

Proviso 34.42 Obesity

Delete

The Agency requests deletion. Partners are already working together as a part of the SCaledown Initiative, and this proviso does not include all of the agencies and organizations involved. Partners are working together in a very committed, voluntary capacity, and have been doing so for 3 years. Additionally, the proviso addresses two unfunded mandates of the Student Health and Fitness Act of 2005 (59-10-50 and 59-10-320).

Proviso 34.43 Residential Treatment Facilities Swing Beds

Delete

DHEC requests deletion due to potential conflicts with federal CMS rules and regulations. Pursuant to federal regulations, swing beds are certified units in hospitals and critical assess hospitals that are located in rural areas as designated by the Census Bureau. In addition, the hospital must be licensed for fewer than 100 beds (42 C.F.R. Section 482.58). Also under federal regulations, psychiatric residential treatment facility (PRTF) units are not hospitals, but rather are units are separately certified from the hospital and are considered a separate and distinct entity from the hospital and must meet specific regulations found under 42 C.F.R. Sections 441.151 through 441.182 and 483.350 through 483.376. Additionally, age limitations for PRTFs would not allow adult patients to be admitted into a PRTF. 42 C.F.R. Section 441.151 specifies that the services must be provided before the individual reaches 21, or, if the individual was receiving services immediately prior to turning 21, before the individual turns 22 (or, if earlier, before the individual no longer requires the services). This proviso can potentially cause regulatory compliance issues for both hospitals and PRTFs.

S.C. Code Section 44-61-70 authorizes DHEC to impose monetary penalties for violations of an authorization, license, or permit under the EMS Act but no provision addresses whether DHEC may retain any monetary penalties collected pursuant to the EMS Act for use in administration of the program, like other program areas within Health Regulation

DHEC requests a new proviso that allows the Bureau of EMS to retain up to \$40,000 of the civil monetary penalties assessed against nonconforming providers in order to use additional funds for inspections to enforce compliance.

FTE Request for FY 2017-18

Electronic Health Record

- 1 Electronic Health Record Administrator
- 1 LIMS Administrator
- 1 Clinical Health Record Lead
- 1 Database Administrator
- 1 System Developer

Ę

EA Lab Quality Assurance

2 Chemists II/Environmental Health Manager II

2

EMS- Stroke Prevention

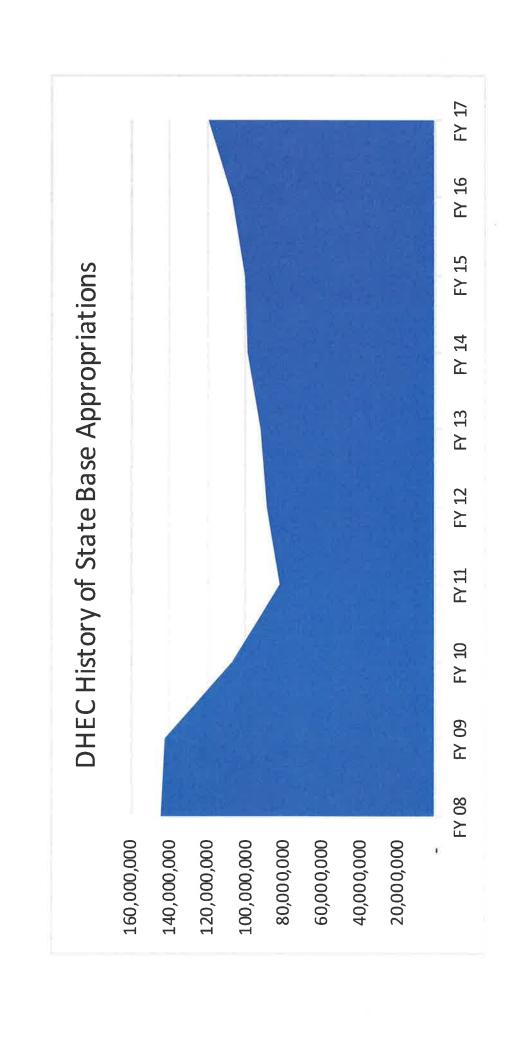
1 Program Coordinator II

Lead Screening

- 2 Environmental Health Manager I
- 1 Environmental Health Manager II
- 1 Program Coordinator II
- 1 Public Health Nurse
- .2 Program Developer
- .2 PHSIS Manager

5.4

13.4 Total New FTEs Requested



South Carolina Department of Health and Environmental Control Appropriations Balance Sheet: FY 12; FY13; FY14; FY15; FY 16; FY 17 Expenditures pulled from SCEIS 424

	FY 12	FY 12	FY 13	FY 13	FY 14	FY 14	FY15	FY 15	FY 16	FY 16	FY 17
	Budget	Expended	Budget								
State Base	89,358,686	88,657,131	91,847,984	92,639,854	99,623,924	97,776,945	100,480,255	104,572,403	106,860,927	107,409,750	119,916,820
Pay Plan	788,836		2,718,255				1,849,672		376,255 5		2,631,012 6
ADJ			(*		(50,001) 4						
State NonRecurring		100,000	1,800,000 3	1,800,000							
Supplemental			953,680	953,677	5,050,000	2,402,737	6,550,700	7,279,024	2,425,001	2,225,000	11,250,000
Federal		234,761,936	279,140,200	230,799,586	286,140,200	211,637,162	286,140,200	237,667,612	286,140,200	204,096,960	286,140,200
Earmarked		136,286,499	179,230,229	135,040,325	179,230,229	134,641,109	175,589,511	144,303,814	175,589,511	152,896,290	175,589,511
Restricted	J	10,388,283	21,669,503	9,508,246	21,669,503	9,378,312	25,310,221	17,048,514	25,310,221	13,209,921	25,310,221
	552,801,553	470,193,849	577,359,851	470,741,688	591,663,855	455,836,265	595,920,559	510,871,367	596,702,115	479,837,921	620,837,764

Loss of Babynet
 Bleeding Disorder
 Community Health Centers
 Dental program not funded
 Fringe distribution
 Salary and Fringe Increments

Budgets are as appropriated

2017 Program Enhancements (State Recurring Funds)

Data Center Infrastructure \$8,000,000

DHEC and the Department of Administration's Division of Technology continue to work collaboratively on the planning and preparation for the DHEC data center migration. Migration of servers/applications to begin this spring. Ninety percent of migrations expected to be completed by end of summer.

Facility Security Support \$302,375

On-site security has resumed at all Columbia facilities.

NPL Gold Mine Sites \$450,000

The NPL Gold Mine fund was established to assist with the State's cost share for remedies at any abandoned gold mine in the state that becomes (or is) a federal Superfund site listed on the National Priorities List (NPL) and where there is no viable responsible party.

Currently, there are two such gold mines in SC, the former Barite Hill mine in McCormick and the former Brewer Gold mine in Jefferson. The funding is necessary to cover the state's cost share with EPA in order for EPA to use federal Superfund dollars. The split is: 90/10 EPA/SC on the capital costs for the remedy, and 100% SC for long-term operation and maintenance of the remedy. At Brewer, the state share is projected to be at least \$2M (10% of the projected \$20M capital costs) and then \$1M per year for operation and maintenance. Barite Hill could be similar in scale.

Dam Safety and Agricultural Programs \$661,500

This budget included 7 positions for dam safety and 1 position for agricultural permitting. All 8 positions have been filled.

Dam Safety

The positions provided to the Dam Safety Program in the 2016 budget are being utilized for routine functions of the program including inspection of regulated dams, review of engineering plans and applications for repair of regulated dams, and responding to citizen concerns regarding dams. Additionally, these added positions have been performing follow-up inspection on dams damaged or breached as a result of the October 2015 storm and Hurricane Matthew and will be reviewing engineering assessments required of dam owners based on post-storm assessments of regulated dams.

Agriculture Permitting

The Environmental Health Manager position provided to the Agricultural Permitting Program is being utilized to review applications for new facilities in order to streamline the permitting process and reduce review time frames.

SC Ambient Water Quality \$945,000

Funds were allocated for 16 new positions. 14 of the 16 have been filled; 1 position in the Aiken lab and 1 in the main Bureau of Environmental Health Services (BEHS) lab have not been filled. Of the remaining two, one candidate has been selected and is in the offering processes (BEHS lab). With these new employees, we have increased sampling from every other month to every month, doubling the monitoring of our ambient water quality network samples.

Infectious Disease-TB Control \$1,752,625

Approximately 60% of the funds were used to support personnel in the DHEC central office and the regions. This includes nursing staff in the regions who conduct case management of TB infected individuals and central office staff who monitor the TB data, and provide guidance for TB control activities statewide.

The remaining funds were used for operating costs to include the costs of TB medications and medical services to treat active TB cases and to prevent latent TB cases from becoming infectious.

Infectious Disease-Epidemiology \$500,000

Created four new positions:

- Assistant State Epidemiologist position has been filled and is responsible for providing leadership, medical, and epidemiological consultation to statewide disease control programs, other agency programs, and the general public.
- Epidemiologist position has been filled to analyze data and assist in implementing control measures for Healthcare Associated Infections under the mandated Healthcare Associated Infections Disclosure Act.
- Epidemiologist position has been filled in the surveillance and outbreak section of the Division of Acute Disease and Epidemiology to assist in analyzing communicable disease data and generating reports.
- We are still recruiting a fourth epidemiologist.

EMS-Stroke Prevention \$68,138

A new coordinator was hired on December 17, 2016. He has since presented at the Annual Heart and Stroke Care Conference at the SC Hospital Association, reconvened the Stroke Advisory Council, redrawn the statewide stroke center map for publishing, and drafted a regulation for the stroke statute.